



Town of Franklin
PO Box 1479
Franklin, NC 28744
(828) 524-2516

**Room Occupancy Tax Out of
Business/Address Change**

Date: _____
Parcel ID: _____

Business Name: _____

Name of Owner or Corporate Officer: _____

Address Change

Current Physical Address: _____

City: _____ State: _____ Zip: _____

Current Mailing Address: _____

City: _____ State: _____ Zip: _____

New Physical Address: _____

City: _____ State: _____ Zip: _____

New Mailing Address: _____

City: _____ State: _____ Zip: _____

Out of Business Notification

Date Business Closed: _____

Permanent Temporary, reopening on _____

Sale or Transfer

Date of Sale or Transfer: _____

Name of New Owner: _____

Mailing Address of New Owner: _____

City: _____ State: _____ Zip: _____